

## PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents  
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20322 7590 09/20/2005

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10/20/2005 TBESHAHE 00000026 192614 10708235

01 FC:1501 1400.00 DA  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Julie A. Eslick (Depositor's name)  
Julie A. Eslick (Signature)  
October 19, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/708,235	02/18/2004	Hiroyuki YAMAUCHI	28569.5836	2234

TITLE OF INVENTION: SIGNAL TRANSMITTING RECEIVING APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/20/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHO, JAMES HYONCHOL	2819	326-030000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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1 Snell & Wilmer L.L.P.  
2  
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Matsushita Electric Industrial Co., Ltd.

Osaka, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-2814 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

S. Shahpar

Date 10-19-05

Typed or printed name

Shahpar, Shahpar

Registration No. 45,875

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

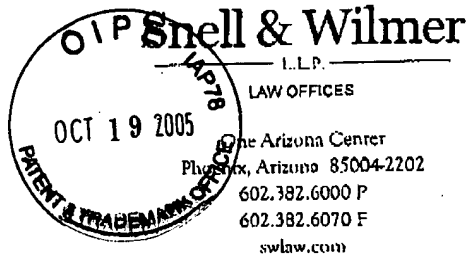
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## FACSIMILE TRANSMISSION

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Name	Fax Number	Phone Number
Commissioner for Patents - MAIL STOP ISSUE FEE U.S. Patent Office	571.273.2885	

FROM: Shahpar Shahpar

PHONE: 602.382.6306

RE: Issue Fee Transmittal for U.S. Serial No. 10/708,235

### MESSAGE:

Please see attached. Please confirm receipt of attached by return facsimile. Authorization to charge Deposit Account No. 19-2814 has been indicated on the transmittal form.

ORIGINAL DOCUMENT: Will not be sent

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3

CONFIRMATION NO.:

CLIENT MATTER NO.: 28569.5836

PLEASE RETURN TO:

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